



Kern Insurance Solutions Consult

Keep Insurance Simple

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PERSONAL LINES SHORT-TERM INSURANCE QUESTIONNAIRE

BROKER NAME		
POLICY HOLDER INFORMATION		
TITLE, FIRST NAME(S) & SURNAME		
MARITAL STATUS		
ID NUMBER / PASSPORT NUMBER (IF NOT SA CITIZEN)		
DATE OF BIRTH		
OCCUPATION		
PHYSICAL ADDRESS		
POSTAL ADDRESS		
CELLPHONE NUMBER	WORK/HOME NUMBER	
EMAIL ADDRESS(S)		
CURRENT INSURER(S)		
CURRENT POLICY NUMBER(S)		

THIS DOCUMENT SELF-COMPILES AFTER THE SELECTION BELOW IS MADE.

THIS DOCUMENT IS ONLY COMPATIBLE WITH ADOBE READER OR ADOBE ACROBAT.

IF YOU EXPERIENCE PROBLEMS WHILE COMPLETING THIS DOCUMENT, PLEASE EMAIL US: ADMIN@KIS.ORG.ZA

Instructions:

1. Insert the number of items you require cover for next to the relevant sections below (e.g. If you need cover for two vehicles, replace the 0 with a 2 next to the Vehicle section.
2. Once you have selected the number of items per section, click "Compile form" to include the relevant pages to the document.
3. **PLEASE NOTE:** Once you have compiled the form, you cannot make changes to the number of sections required. If you make changes, the form will reset and the questionnaire will be blank.
4. If you wish to start over, click the "reset form" button.
5. Please complete the required pages truthfully and accurately in order for KIS to advise the best insurance products for your needs.
6. Once the document is completed, save it and email it to admin@kis.org.za or directly to your KIS broker.

COVER SECTIONS REQUIRED

SECTION	NUMBER OF ITEMS PER SECTION	ADDED
BUILDING(S) - 1 section per different physical risk address		
HOUSEHOLD CONTENTS - 1 section per different physical risk address		
PORTABLE POSSESSIONS (ALL-RISKS) - space for multiple items per section		
MOTOR VEHICLE(S)		
MOTORCYCLE(S)		
CARAVAN/TRAILER/WATERCRAFT(S)		
OTHER COVER NOT MENTIONED ABOVE (COMPLETE ON PAGE)		
INCLUDE RECORD OF ADVICE FOR BROKER COMPLETION: YES <input type="checkbox"/>		